

70187

File Original with  
Department of Ecology  
Second Copy Owners Copy  
Third Copy Drillers Copy

# WATER WELL REPORT

STATE OF WASHINGTON

Notice of Intent W109680  
UNIQUE WELL ID # AET-642  
Water Right Permit No \_\_\_\_\_

(1) OWNER Name Bob Davis Address P.O. Box 656 Cleelum WA 98920

(2) LOCATION OF WELL County Kittitas SW 1/4 E 1/4 Sec 8 T 19 N R 15 WM

(2a) STREET ADDRESS OF WELL (or nearest address) \_\_\_\_\_

TAX PARCEL NO \_\_\_\_\_

(3) PROPOSED USE ☒ Domestic ☐ Industrial ☐ Municipal  
☐ Irrigation ☐ Test Well ☐ Other  
☐ DeWater

(4) TYPE OF WORK Owner's number of well (if more than one) \_\_\_\_\_  
☒ New Well Method ☐ Dug ☐ Bored  
☐ Deepened ☐ Cable ☐ Driven  
☐ Reconditioned ☒ Rotary ☐ Jetted  
☐ Decommission

(5) DIMENSIONS Diameter of well 10' 8" 6" x 4" inches  
Drilled 420' feet Depth of completed well 420' ft

(6) CONSTRUCTION DETAILS

Casing Installed

☒ Welded

☒ Liner installed

☐ Threaded

Diam from 12' ft to 198' ft

Diam from -20' ft to 420' ft

Diam from \_\_\_\_\_ ft to \_\_\_\_\_ ft

Perforations ☒ Yes ☐ No

Type of perforator used Skill-SSW

SIZE of perforations 1/8" in by 7 1/2" in  
400 perforations from 220' ft to 420' ft

Screens ☐ Yes ☒ No ☐ K Pac Location \_\_\_\_\_

Manufacturer's Name \_\_\_\_\_

Type \_\_\_\_\_ Model No \_\_\_\_\_

Diam \_\_\_\_\_ Slot Size \_\_\_\_\_ from \_\_\_\_\_ ft to \_\_\_\_\_ ft

Diam \_\_\_\_\_ Slot Size \_\_\_\_\_ from \_\_\_\_\_ ft to \_\_\_\_\_ ft

Gravel/Filter packed ☐ Yes ☐ No ☐ Size of gravel/sand \_\_\_\_\_

Material placed from \_\_\_\_\_ ft to \_\_\_\_\_ ft

Surface seal ☒ Yes ☐ No To what depth? 20' ft

Material used in seal Bentonite

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_

Method of sealing strata off \_\_\_\_\_

(7) PUMP Manufacturer's Name \_\_\_\_\_

Type \_\_\_\_\_ HP \_\_\_\_\_

(8) WATER LEVELS Land surface elevation above mean sea level \_\_\_\_\_ ft

Static level NA ft below top of well Date \_\_\_\_\_

Artesian pressure \_\_\_\_\_ lbs per square inch Date \_\_\_\_\_

Artesian water is controlled by \_\_\_\_\_

(Cap valve etc)

(9) WELL TESTS Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☐ No If yes by whom? \_\_\_\_\_

Yield \_\_\_\_\_ gal/min with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs

Yield \_\_\_\_\_ gal/min with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs

Yield \_\_\_\_\_ gal/min with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time Water Level Time Water Level Time Water Level

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

Date of test \_\_\_\_\_

Bailer test 20 gal/min with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs

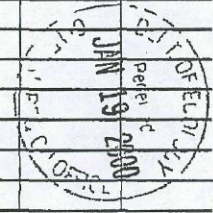
Air test 20 gal/min with \_\_\_\_\_ ft drawdown after \_\_\_\_\_ hrs

Artesian flow \_\_\_\_\_ gpm Date \_\_\_\_\_

Temperature of water \_\_\_\_\_ Was a chemical analysis made? ☐ Yes ☐ No

(10) WELL LOG or DECOMMISSIONING PROCEDURE DESCRIPTION  
Formation Describe by color character size of material and structure and the kind and nature of the material in each stratum penetrated with at least one entry for each change of information Indicate all water encountered

MATERIAL	FROM	TO
Topsoil	1'	3'
Phyllite & clay - grey	3'	35'
Phyllite & clay - brown	35'	190'
Clay & gravel - white	190'	195'
Phyllite - blk	195'	205'
Phyllite & quartz - blk	205'	230'
Phyllite & quartz - blk	230'	243'
Phyllite & quartz - blk	243'	258'
Phyllite - blk	258'	316'
Phyllite - light grey	316'	342'
Phyllite & quartz - blk	342'	357'
Phyllite & quartz	357'	361'
Phyllite & quartz - blk	361'	388'
Phyllite - blk	388'	394'
Quartz & phyllite - white	394'	396'
Phyllite & quartz - blk	396'	420'



Work Started 12/16/99 Completed 12/21/99

## WELL CONSTRUCTION CERTIFICATION

I constructed and/or accept responsibility for construction of this well and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief

Type or Print Name Kelly Olson License No 1217  
(Licensed Driller/Engineer)

Trainee Name \_\_\_\_\_ License No \_\_\_\_\_  
Drilling Company Waterman Well Drilling Inc

(Signed) Kelly Olson License No 1217  
(Licensed Driller/Engineer)

Address 106 Berriman Ln Selah WA 98942

Contractors WATER WDO220B Date 01/03/2000  
Registration \_\_\_\_\_

(USE ADDITIONAL SHEETS IF NECESSARY)

Ecology is an Equal Opportunity and Affirmative Action employer. For special accommodation needs contact the Water Resources Program at (360) 407 6600. The TDD number is (360) 407 6006.





☒ Construction 292423

☐ Decommission *ORIGINAL INSTALLATION* Notice  
of Intent Number

## CURRENT

**Notice of Intent No. W 256141**

Unique Ecology Well ID Tag No. BAN 756

Water Right Permit No.

Property Owner Name Pellegrino, Tony

Well Street Address Lot 5 Timber Mountain Loop Rd.

City Cle Elum County Kittitas

Location SW 1/4-1/4 SE 1/4 Sec 08 Twn 19 R 15 <sup>EWM</sup>  
or <sup>WWM</sup> ☒ check  
☐ one

(Lat/Long (s, t, r      Lat Deg N 47      Lat Min/Sec 09.821

Still **REQUIRED**)      Long Deg W 120      Long Min/Sec 59.609

Tax Parcel No. 19-15-08050-0005

### CONSTRUCTION OR DECOMMISSION PROCEDURE

Formation: Describe by color, character, size of material and structure, and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information. (USE ADDITIONAL SHEETS IF NECESSARY.)

[illegible]☒ Driller ☐ Engineer ☐ Trainee Name (Print) Brett Phythian

Driller/Engineer/Trainee Signature

Driller or trainee License No. 1249

**RETRAINER**

Drilling Company Tumwater Drilling & Pump Inc. 509-548-5361

Address 9290 Hwy 2 / P.O.Box 777

City, State, Zip Dryden / Leavenworth, WA 98826

Contractor's  
Registration No. TUMWADP 011 LZ

Date 01-03-2008

ECY 050-1-20 (Rev 3/05)

*Ecology is an Equal Opportunity Employer.*



BENT-11-17

# CONSERVANCY BOARD DECISION REVIEW ROUTER

File No.: CS4-01344(A)C@1

Author/Date: Hutton

Y Sharepoint>WR Documents

SharePoint > \_\_\_\_\_

Staff	Function	Date	Initial
Glenda:	Internet & Letter ✓	3/20	
Sandy:	WRTS	3/20/12	CS
Debra:	GWIS (initial/date):	WCH 3/22/12	
Permit Writer:	WTWG Summary		
Hydrogeo:			
30-Day Ext Letter			

45-Day ends: 4-23-12

30-Day Extension ends: \_\_\_\_\_

GWIS remarks & edits (if more room is needed use back of page):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Section Mgr: ALCS 4/19/12

Mail out/date (Admin): 4.19.12 gg

Circle appropriate WRIA:

County: Benton ~~Washington~~

TRIBE	WRIA
Colville Confederated Tribes	49 50 51 52 53 58 60 61
Yakama Nation	29 30 <u>31</u> 32 33 37 38 39 40
Both Tribes	45 46 47 48

PROTESTS? ☐ Yes ☐ No

Certified CCs: (Check application signatures)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CCs to anyone else? (Please list cc's & protestants):

If more room is needed, use back of page.

ERO Janet Rayala email/pdf  
YN  
Danyell Olson, Benton CB

Minimum Flow River List? (Y:\Adm\Rivers)

Name of River \_\_\_\_\_

Add name to the appropriate River Data Source: ☐

Remarks or Related Files (Need more space? Use back of page):

45 day letter mailed - 3/13/2012 ✓

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Attachments:

- ☒ Your Right to Be Heard
- ☐ PTO appeal? No ~~Your Right to Be Heard~~
- ☐ BC, CC, PA forms \_\_\_\_\_
- ☒ Water Measurement Requirements
- ☐ Fish Screening Criteria
- ☐ Other: \_\_\_\_\_

SEE BACK FOR FURTHER INFORMATION







U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com®

**OFFICIAL USE**

Postage \$ BENT-11-17

Certified Fee 11-11-18

Return Receipt Fee (Endorsement Required) 11-11-19

Restricted Delivery Fee (Endorsement Required) 11-11-20

Total Postage & Fees \$ 11-11-21

Sent To Mercer Canyons Inc

Street, Apt. No., or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

CS4-01344(A)C@1 (BENT-11-17) CS4-30053(A)C@1 (BENT-11-18)  
 CS4-30053(K)C@1 (BENT-11-19) CS4-30053(P)P@1 (BENT-11-20)  
 CS4-25639(I)C@1 (BENT-11-21) CS4-25639(P)C@1 (BENT-11-22)  
 CS4-25639(S)C@1 (BENT-11-23)  
 Green Card is in CS4-01344(A)C@1 (BENT-11-17)

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MERCER CANYONS INC  
 ATTN: ROBERT MERCER  
 46 SONOVA RD  
 PROSSER WA 99350

WR/gg BENT-11-17 (17 thru 23) CS4-01344(A)C@1

2. Article Number (Transfer from service label) 7010 0290 0000 7131 1101

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature A. Rios ☐ Agent ☒ Addressee

B. Received by (Printed Name) A. Rios C. Date of Delivery 4-23

D. Is delivery address different from item 1? ☐ Yes ☒ No  
 If YES, enter delivery address below:

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540